

PART B - FEE(S) TRANSMITTAL

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DAVID W. LYNCH
 CHAMBLISS, BARNER & STOPHEL
 1000 TALLAN SQUARE S
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 CHATTANOOGA, TN 37402

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_____ (Signature)
_____ (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/777,529	02/12/2004	Mark Charles Davis	SJO92003003US1	5127

TITLE OF INVENTION:

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$1740	10/09/2007
EXAMINER	ART UNIT	CLASS	SUBCLASS		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.562)	2. Fee printing on the patent front page, fee: (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the values of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO SB-122) attached	1. David W. Lynch
<input checked="" type="checkbox"/> "Fee Address" indication for "Fee Address" indication form PTO SB-47, Rev. 05-02 or more recently attached. Use of a Customer Number is required.	2. Chambliss, Barner & Stophel PC
	3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
 International Business Machines Corporation

(B) RESIDENCE (CITY AND STATE OR COUNTRY)
 Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) is/are enclosed: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication fee (no small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): <input type="checkbox"/> A check in the amount of the fee(s) is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2018 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized by change the required fee(s), or credit any overpayment, in Deposit Account Number _____ 02-2468 (enclose an extra copy of this form)
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5. Change in Entity Status (from status indicated above)
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to reimburse any previously paid issue fee in the application identified above.
 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature: Bandall J. Blumsterg Date: October 2, 2007
 Typed or printed name: Bandall J. Blumsterg Registration No.: 40,518

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